

APPENDIX

**CLINICAL PSYCHOLOGY PROGRAM
DEPARTMENT OF PSYCHOLOGY
UNIVERSITY OF REGINA**

APRIL 2015 TO MAY 2016 PROGRAM REVIEW

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Overview of Review

CPA encourages us to evaluate our program on a regular basis. The purpose of this report is to review the goals, objectives and outcomes of the Clinical Psychology Program. Please send comments and feedback to lynn.loutzenhiser@uregina.ca.

Research

Research Goals: We strive to prepare students to have an understanding and respect for both basic and applied research.

We subscribe to the views that the clinical scientist, who is competently trained in practice, makes the most significant contributions to clinical research; and the practitioner, who is familiar with the body of basic and applied research, and, who can critically evaluate research findings makes the soundest contributions to society and the profession.

Research Objectives: To meet the above goals, students: 1) take courses in research methods and statistics and gain experience in program evaluation; 2) take clinical courses that incorporate research literature; 3) complete an M.A. thesis and Ph.D. dissertation; and 4) participate in faculty research projects.

Outcomes: The following are some indicators that represent how we are doing in this area:

	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
Research Methods course average	88%	91%	91%	91%	94%	90%	88%	88%
Statistics course average	85%	86%	91%	88%	90%	89%	88%	90%
Students with at least one conference presentation	92%	97%	95%	92%	100%	100%	100%	100%
Students with at least one refereed publication	64%	69%	71%	69%	82%	89%	64%	70%
Students holding RA positions*	76%	61%	67%	73%	59%	57%	64%	56%
Students with major external funding*, **	45%	55%	50%	63%	56%	64%	39%	37%
Students with Faculty of Graduate Studies & Research(FGSR) funding*	45%	61%	70%	69%	74%	64%	69%	97%

* excludes students who are on or have completed the pre-doctoral residency

** includes both tri-council funding and other major external funding

Clinical Practice

Clinical Practice Goals: Students will be trained to be competent in assessment, diagnosis, and intervention. In each area, students will gain competency in the development and maintenance of interpersonal relationships, including competency in working with diverse groups. It is recognized, however, that the field of clinical psychology is diverse and no single practitioner can master all areas. Students will be taught to recognize their skills and when appropriate refer to colleagues who have the requisite skills.

Clinical Practice Objectives: Students will meet the clinical goals by: 1) completing course work in psychopathology, assessment and interventions exposing students to more than one theoretical orientation and skills for working with both adults and children and diverse populations; 2) carrying out at least 2700 hours of clinical training under supervision; and 3) completing comprehensive exams that require an oral case presentation, a review paper on a clinical topic, and an ethics oral exam.

Outcomes: Some indicators of our success in this area are:

	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
Psychopathology	85%	89%	87%	87%	87%	91%	87%	87%
Assessment I	84%	88%	89%	87%	89%	87%	86%	87%
Assessment II	-	88%	-	88%	-	90%	-	88%
Interventions I	84%	84%	85%	86%	87%	85%	84%	87%
Interventions II	85%	-	87%	-	87%	-	89%	-
% Students Matched (includes those matched through clearing house)	75% (86% Canadian students matched by AAPIC)	100% (75% Canadian students matched by AAPIC)	100% (1 non-accredited match, compared to 83% match)	80% (73% of Canadian Students matched by APPIC)	100% (84% of Canadian students matched by APPIC)	100% (86% of Canadian students matched by APPIC)	100% (84% of Canadian students matched by APPIC)	100% (94% of Canadian students matched by APPIC)

Pre-doctoral Residencies	
2016-2017	<ul style="list-style-type: none"> Northern Ontario Psychology Internship Consortium, Thunder Bay, ON Calgary Clinical Psychology Program London Clinical psychology Consortium, London, ON Vancouver Coastal Health, Vancouver, BC
2015-2016	<ul style="list-style-type: none"> University of Arizona College of Medicine Calgary Clinical Psychology Program London Clinical Psychology Consortium; Adult Mental Health Track Hospital for Sick Children Psychology Internship-Toronto, ON Annapolis Valley Health Psychology Internship- Kentville, NS Regina Qu'Appelle Health Region
2014-2015	<ul style="list-style-type: none"> Vancouver Coastal Health Royal Ottawa Health Care Group University of Washington Saskatoon Health Region Centre for Addiction & Mental Health - Clarke Division – Toronto, ON Regina Qu'Appelle Health Region
2013-2014	<ul style="list-style-type: none"> Vancouver Coastal Health

	<ul style="list-style-type: none"> • Royal Ottawa Health Care Group • Ottawa Hospital Health and Rehabilitation Psychology • Regina Qu'Appelle Health Region (2)
2012-2013	<ul style="list-style-type: none"> • Calgary Health Region • Royal Ottawa Health Care Group • Regina Qu'Appelle Health Region (primary rotation: Functional Rehab Program) • Regina Qu'Appelle Health Region (primary rotation: WRC Children's Program)
2011-2012	<ul style="list-style-type: none"> • University of Manitoba, Department of Clinical Health Psychology, Winnipeg, MB • UBC Counselling Services • BC Mental Health and Addiction Services, Clinical Child and Adolescent Track, BC Children's Hospital
2010-2011	<ul style="list-style-type: none"> • Centre for Addiction & Mental Health - Clarke Division – Toronto, ON • Millard Health Centre, Edmonton Alberta • Ongwanada: Kingston Internship Consortium • Queen Elizabeth II Health Sciences Center, Halifax, NS • Regina Qu'Appelle Health Region (2) • Saskatoon Health Region, Saskatoon, SK (2)
2009-2010	<ul style="list-style-type: none"> • Calgary Health Region (2) • University of Manitoba, Department of Clinical Health Psychology, Winnipeg, MB
2008-2009	<ul style="list-style-type: none"> • Ottawa Hospital • Royal Ottawa Mental Health Centre • Regina Qu'Appelle Health Region
2007-2008	<ul style="list-style-type: none"> • Edmonton Consortium Clinical Psychology Residency • Regina Qu'Appelle Health Region
2006-2007	<ul style="list-style-type: none"> • Queen Elizabeth II Health Sciences Center, Halifax, NS (2) • Saskatoon Health Region • University of Manitoba, Department of Clinical Health Psychology, Winnipeg, MB
2005-2006	<ul style="list-style-type: none"> • University of Manitoba, Department of Clinical Health Psychology, Winnipeg, MB • Centre for Addiction & Mental Health - Clarke Division – Toronto, ON • Queen Elizabeth II Health Sciences Center, Halifax, NS • River Valley Health Internship, Fredericton, NB
2004-2005	<ul style="list-style-type: none"> • Central California Psychology Internship Consortium Association, Fresno, CA • Department of Corrections, Mental Health Services Division, Salinas Valley State Prison, Soledad, CA • Saskatoon Health Region, Saskatoon, SK • St. Joseph's Healthcare, Hamilton, ON • Annapolis Valley Health - Valley Regional Hospital, Kentville, NS
2006-2007	<ul style="list-style-type: none"> • Queen Elizabeth II Health Sciences Center, Halifax, NS (2) • Saskatoon Health Region • University of Manitoba, Department of Clinical Health Psychology, Winnipeg, MB
2005-2006	<ul style="list-style-type: none"> • University of Manitoba, Department of Clinical Health Psychology, Winnipeg, MB • Centre for Addiction & Mental Health - Clarke Division – Toronto, ON • Queen Elizabeth II Health Sciences Center, Halifax, NS • River Valley Health Internship, Fredericton, NB
2004-2005	<ul style="list-style-type: none"> • Central California Psychology Internship Consortium Association, Fresno, CA

	<ul style="list-style-type: none"> • Department of Corrections, Mental Health Services Division, Salinas Valley State Prison, Soledad, CA • Saskatoon Health Region, Saskatoon, SK • St. Joseph's Healthcare, Hamilton, ON • Annapolis Valley Health - Valley Regional Hospital, Kentville, NS
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Knowledge

Knowledge Goals: Students will gain a working understanding of biological, social, cognitive and affective bases of behaviour as well as individual differences, statistics and research methods. A more thorough knowledge of personality, psychopathology, assessment, diagnostics, intervention, ethics and professional behaviour will be obtained.

Knowledge Objectives: To meet the knowledge goals students: 1) complete course work at the graduate level in all of the above areas, 2) gain knowledge through clinical experiences, and 3) complete comprehensive exams.

Outcomes: Indicators of success are reflected in course work completion noted above but also in marks for the following courses:

	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
803 (Psychometrics)	-	91%	-	91%	-	91%	-	91%
845 or 847 (Neuropsychology)	89%	85%	-	90%	82%	-	89%	-
881 (Information Processing)	86%	85%	86%	88%	-	90%	-	89%
820 (Social)	86%	-	91%	-	88%		91%	89%

Ethics and Professional Conduct

Ethics and Professional Conduct Goals: Students will be prepared to be ethical and professional in their research, clinical, and teaching activities, and sensitive to issues of racial and cultural diversity and individual differences.

Ethics and Professional Conduct Objective: To meet the ethical goals of our program, students: 1) take a course in professional ethics, 2) are exposed to diverse clients at clinical training sites (over 2700 hours of clinical training), 3) complete an oral ethics exam as part of the comprehensive examination process, and 4) apply for ethics approval for M.A. and Ph.D. research.

Outcomes: This is measured through the following:

	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
806 Ethics Average	88%	85%	89%	86%	85%	86%	86%	88%
Supervised clinical hours when applied to internship	1334	1389	1739	1595	1709	2345	2213	3013

Direct Hours		411	527	648	538	725	708	643
Supervision Hours		217	250	204	243	284	315	323

Leadership

Leadership Goals: Students will gain experiences that prepare them to take leadership roles and contribute to psychology as a profession.

Leadership Objectives: Students complete a seminar in professional issues at the PhD level and are encouraged to:

- 1) present and publish their work, 2) attend professional seminars and conferences when possible, 3) gain experience in supervision of junior students, 4) obtain experience as teaching assistants or sessional instructors, 5) be active in the department and the PGSA and the community, and 6) be members of the Canadian Psychological Association or other professional organizations.

Outcomes: Indicators of outcome in this area are seen through examination of students enrolled each year:

	2008-2009	2009 - 2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016 (n=36)
Conference Presentations	92%	97%	95%	92%	100%	100%	86%	89%
Publications	64%	69%	71%	69%	82%	89%	64%	63%
TA/Sessional Positions	34%	51%		50%	56%	75%	64%	70%
Prof. Org Membership	94%	100%	97%	92%	97%	100%	94%	93%
Additional Workshops	56%	76%	97%	90%	79%	93%	89%	67%

**Note: as of 2015, data will be reported on terms of numbers of students*

Recent Graduates

Fall 2010	Liz Brass, R. D. Psych	Psychologist, Child and Youth Services, Regina, SK
Fall 2010	Nicholas Carleton	Assistant Professor, Department of Psychology, University of Regina
Spring 2011	Michelle Bourgault-Fagnou	Psychologist, Functional Rehab Program, Regina, SK
Spring 2011	Amanda Lints-Martindale	Assistant Professor, Department of Clinical Health Psychology, University of Manitoba, and Staff Psychologist, Community Mental Health Program, Steinbach, MB
Spring 2011	Jennifer Stapleton	Psychologist, Acute Care, Waterford Hospital, St. John's, NL
Fall 2011	Kelsey Collimore	Postdoctoral Fellow, CANH, now Psychologist, Royal Ottawa Mental Health Centre, Ottawa, ON
Fall 2011	Megan Tuttle	Psychologist, Child and Youth, Regina, SK

Spring 2012	Jennifer Amy Claude Janzen	Psychologist, Adult Mental Health, Regina, SK
Fall 2012	Candice Bovell	Psychologist, Markham Psychologists, Markham, ON
Fall 2012	Paulette Hunter	Assistant Professor, St. Thomas More College, Saskatoon, SK
Spring 2013	Kim McKay-McNabb	Assistant Professor, First Nations University
Spring 2013	Atif Shujah	Psychologist, Oshawa Psychological and Counselling Services
Fall 2013	Theresa Dever-Fitzgerald	Psychologist, St. John Psychology Centre
Fall 2013	Melissa Kehler	Mental Health Practitioner, Edmonton North Primary Care Network
Fall 2013	Dufton Lewis	Ranch Ehrlo's Clinical Assessment and Resource Services
Fall 2013	Daniel Peluso	Psychologist, Ottawa Institute for CBT
Fall 2013	Meghan Woods	Post-doctoral position, University of Regina; Psychologist, Regina Mental Health
Spring 2014	Phil Sevigny	Psychologist, Child & Youth Services, Regina Qu'Appelle Health Region; Luther College, Term appointment
Fall 2014	Nathalie Berard	Wascana Rehabilitation Centre, Children's Program
Fall 2014	Sarah Chan	Psychologist, Adult Mental Health, Regina, SK
Fall 2014	Nicky Pugh	Brief Intervention Unit, Vancouver Coastal Health –
Spring 2015	Murray Abrams	Wascana Rehabilitation Centre, Functional Rehabilitation Program
Spring 2015	Heather Eritz	Psychologist, Child & Youth Services, Regina Qu'Appelle Health Region
Spring 2015	Shannon Jones	Southport Psychology, Calgary Alberta
Spring 2015	Michelle Makelki	Psychologist, BC
Fall 2015	Nicole Alberts	Research Associate, Department of Psychology, St. Jude's Children's Research hospital, Memphis, TN
Fall 2015	Mathew Fetzner	Psychologist, Odyssey Health Services, Ottawa, ON
Fall 2015	Michel Thibodeau	Psychologist, University Health Network Eating Disorder Program, Toronto

Spring 2016	Jasmin Dhillon	Serenity Now Wellness Centre, Calgary, AB
Spring 2016	Shahlo Mustafaeva	Psychologist, Adult Mental health Clinic, Regina, SK

Graduate Survey

Past graduates of our PhD program completed a survey about our program. Below is a summary of feedback from this survey.

	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2016
To what extent did the program achieve its goal to train you as a scientist practitioner?	Completely – 30% Mostly –70%	Completely – 40% Mostly –60%	Completely – 40% Mostly – 60%	Completely – 60% Mostly – 40%	Completely – 70% Mostly –30%	Completely – 50% Mostly – 50%	Completely – 50% Mostly – 50%
How would you rate the overall quality of the training you received?	Excellent – 60% Good – 40%	Excellent – 60% Good – 40%	Excellent – 50% Good – 50%	Excellent – 40% Good –60%	Excellent – 40% Good – 60%	Excellent – 60% Good –40%	Good –100%
How prepared did you feel for:							
Conducting clinical assessments	Great –60% Good –40%	Great– 70% Good –30%	Great – 60% Good – 40%	Great– 60% Good – 40%	Great –60% Good – 40%	Great –40% Good –50% Fair–10%	Great –50% Good –50%
Conducting clinical interventions	Great –60% Good – 40%	Great –60% Good – 40%	Great – 60% Good – 40%	Great –40% Good – 60%	Great –40% Good –60%	Great –40% Good –50% Fair–10%	Good –100%
Consulting with other professionals	Great –30% Good –40% Fair – 30%	Great –50% Good –50%	Great –50% Good – 50%	Great –50% Good – 40% Fair – 10%	Great –50% Good –40% Fair – 10%	Great –50% Good –40% Fair – 10%	Good –50% Fair-50%
Conducting research	Great –90% Good – 10%	Great –80% Good –10% Fair – 10%	Great –70% Good – 20% Fair – 10%	Great –40% Good – 50% Fair – 10%	Great –40% Good –50% Fair – 10%	Great –60% Good –40%	Great –100%
Consuming research	Great –90% Good – 10%	Great – 100%	Great –90% Good – 10%	Great –90% Good – 10%	Great –80% Good –20%	Great –70% Good –30%	Great –100%
Teaching	Great –30% Good – 30% Fair – 40%	Great –30% Good – 20% Fair – 40% Poor –10%	Great –30% Good – 20% Fair – 50% Poor –10%	Great –40% Good –20% Fair – 30% Poor –10%	Great –40% Good –20% Fair – 40%	Good –40% Fair – 60%	Good –50% Fair -50%
Supervising clinical work	Great –10% Good –30% Fair – 50% Poor – 10%	Great –10% Good –30% Fair – 30% Poor – 30%	Great –10% Good–40% Fair – 20% Poor – 30%	Great –20% Good–40% Fair – 20% Poor – 20%	Great –20% Good –50% Fair – 20% Poor – 10%	Great –10% Good –70% Fair – 20%	Good –50% Fair-50%

Graduate Survey Continued...

Past graduates of our PhD program completed a survey about our program. Below is a summary of feedback from this survey.

	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2016
<i>Dealing with ethical issues</i>	Great –30% Good –60% Fair – 10%	Great –40% Good –60%	Great –40% Good – 60%	Great –40% Good – 60%	Great –40% Good –60%	Great –20% Good –80%	Good –100%
<i>Working with diverse clients</i>	Great –40% Good –40% Fair – 20%	Great –60% Good –40%	Great –60% Good –40%	Great –50% Good –50%	Great –40% Good –60%	Great –30% Good –60% Fair 10%	Good –100%
<i>In an overall sense, how satisfied are you with the training you received?</i>	very satisfied – 40% mostly satisfied – 60%	very satisfied – 40% mostly satisfied – 60%	very satisfied – 30% mostly satisfied – 70%	very satisfied – 30% mostly satisfied – 70%	very satisfied – 30% Mostly Satisfied – 70%	very satisfied – 50% Mostly Satisfied – 50%	Mostly Satisfied – 50% Neutral-50%
<i>If a friend of yours was interested in attending graduate school, would you recommend our program?</i>	Yes, definitely – 60% Yes, I think so – 40%	Yes, definitely – 80% Yes, I think so – 20%	Yes, definitely – 70% Yes, I think so – 30%	Yes, definitely – 80% Yes, I think so – 20%	Yes, definitely – 80% Yes, I think so – 20%	Yes, definitely – 70% Yes, I think so – 30%	Yes, I think so – 100%

Notable strengths and suggestions for improvements: reported by students 2010-2016

STRENGTHS IN THE AREAS OF:

Research

- Research education & training (5)
- Productive research lab (1)
Faculty and Supervisors
- Supportive supervisor/faculty (3)
- Supportive clinical supervisors (1)
- Supportive DCT invested in program and student success (2)
- Expertise and experience of the faculty (2)
- Personable program given small nature of program (3)
- Collaborative program – incorporate input from students ; students shaped program (2)
Clinical Training
- Diversity of clinical training experiences (adult, child, neuropsychological, clinic based, hospital based) (4)
- Felt prepared for internship & career (1)
- Felt competitive with other students from other programs (1)
- Courses/Workshops
- Quality of courses (2)
- Exposed to supervision/consultation/interprofessional collaboration (1)
- Lots of additional training experiences available (e.g., symposium) (1)
General Program
- Good balance of research & clinical training (4)
- Accreditation (1)
- Small and cohesive (1)

SUGGESTIONS FOR IMPROVEMENT:

Courses

- Include actual clients in the intervention II class (2)
- Increase the difficulty of the neuropsychology course (e.g., measures, clinical presentations) (1)
- More information on consultative psychology throughout training (1)
- More emphasis on some other therapy approaches in the intervention ii class (e.g., DBT, motivational interviewing, schema therapy)(1)
- There is a very limited focus on children and families and a solid foundation for family therapy would be beneficial (1)
- Separate adult and child classes (1)
- More additional workshops (1)
- Examine case studies (1)
- Greater emphasis and provision of information about employment as psychologists; (1)
- Limited focus on marginalized populations – first nations; people with disabilities (1)
- Providing students with the criteria used to decide course grades would help to give students a better sense of their strengths and weaknesses. Students would ultimately (maybe not

immediately) benefit from a culture in which everyone hears about strengths and weaknesses (in practica and coursework and informally) from an early stage but, to build confidence, this is best done in a collegial atmosphere with an emphasis on positive changes observed.(1)

Clinical Training

- Ensure students get experience with diversity with real clients (1)
- More practica and clients during placement (2)
- Exposure to more complex and challenging cases in the later stages of the training would have aided in the transition to my current areas of practice (1)
- Providing more opportunities to carry long-term clients throughout training would have also been helpful. (1)
- adapting the training program to changing landscape of healthcare and the role of psychology in healthcare settings (1)
- Difficult to get enough client contact hours for APPIC (1)
- Better preparation for applying for residency (e.g., when speaking with graduates from other programs, they indicated that they have seminars dedicated towards informing students on how to apply, how to interview, how to write a good cover letter) (1)

Research

- Implement strict deadlines for thesis (1)
- Closer tracking of progress on thesis/dissertation and more encouragement on supervisors to maintain schedule (students have limited influence) (1)

Administrative

- More independence from FGSR. Their annual progress reports were repetitive from those completed for our department and I never felt they understood the unique nature of our program to other Ph.D. programs (1)
- Other programs reduce fees once student has completed their comprehensive exams, this would be a nice way to reduce the cost of the program (1)
- Work towards guaranteed funding for incoming students (1)

Financial Support

M.A. Funding

	*2008-2009 (n=14)	*2009-2010 (n=13)	2010-2011 (n=13)	2011-2012 (n=12)	2012-2013 (n=11)	2013-2014 (n=10)	2014-2015 (n=11)	2015-2016 (n=12)
<i>Average level of income:</i>	\$18,640	\$22,432	\$25,105	\$27,187	\$24,082	\$24,531	\$31,629	\$23, 591
<i># of students reporting income below \$10,000</i>	1	0	1	1	2	0	0	0
<i># of students reporting income between \$10,000-19,999</i>	8	6	2	0	2	3	0	4
<i># of students reporting income between \$20,000-\$29,999</i>	4	6	91%	100%	91%	100%	6	4
<i># of students reporting income above \$30,000</i>	1	1	73%	100%	100%	73%	5	4
<i>% with external funding</i>	29%	54%	73%	70%	73%	73%	73%	42%
<i>% with FGSR funding</i>	50%	92%	100%	83%	91%	100%	91%	92%
<i>% who obtained TA funding</i>	29%	54%	92%	67%	73%	100%	100%	67%
<i>% who obtained RA funding</i>	86%	83%	77%	92%	73%	70%	73%	58%
<i>% who held outside employment</i>	1%	0	8%	17%	27%	0	18%	42%
<i>% who obtained a Sask Health Bursary</i>	0	0	0	0	0	0	0	0

* excludes 2 students because data unavailable due to student on leave or ABD

Financial Support

Ph.D. Funding

	2005- 2006 (n=13)*	2006- 2007 (n=15)*	2007- 2008 (n=17)*	2008- 2009 (n=14)*	2009- 2010 (n=18)*	2010- 2011 (n=15)*	2011- 2012 (n=18)	2012- 2013 (n=16)*	2013- 2014 (n=16)	2014- 2015 (n=17)*	2015- 2016 (n=16)*
Average level of income:	\$37,858	\$33,379	\$28,903	\$27,598	\$26,584	\$26,866	\$32,216	\$27,596	\$41,789	\$32,175	\$29,190
# of students reporting income between \$0-19,999	1	4	3	2	5	4	5	3	0	1	2
# of students reporting income between \$20,000-\$29,999	3	2	7	8	7	4	3	4	4	7	7
# of students reporting income between \$30,000-\$39,999	5	4	4	4	3	6	4	6	3	5	3
# of students reporting income above \$40,000	4	5	3	0	3	1	6	3	9	4	4
% with major external funding	76.9%	53%	59%	57%	56%	47%	67%	75%	75%	47%	38%
% with FGSR funding	61.5%	87%	53%	50%	44%	47%	55%	59%	56%	71%	94%
% who obtained TA/sessional funding	46.1%	53%	41%	36%	56%	47%	40%	41%	56%	41%	63%
% who obtained RA funding	46.1%	47%	47%	71%	56%	67%	72%	47%	50%	65%	50%
% who held outside employment	38.5%	53%	35%	14%	28%	20%	22%	12%	25%	41%	19%
% who obtained a Sask Health bursary	7.6%	6%	0	0	11%	NA	NA	NA	NA	NA	NA

* excludes those who are on or have completed the pre-doctoral residency

Program Statistics

	2003-2004	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016
Number of M.A. Students Admitted/ Number of MA. Graduates from Class To Date	7/6 (1 student withdrew after the 1st semester)	4/3	6/5 (1 student withdrew after 1st semester)	4/4	6/6	6/5	6/6	6/6	6/6	5/5	5/5	6/NA	6/NA
MA Time to Completion (months)	35	26	27	25	28	28	23	23	26	23	23.5	NA	N/A
Number of Ph.D. Students Admitted	5	5	4	6	2	7	3	6	8	3	4	6	5
Number of Ph.D. Graduates	1	2	3	2	4	3	2	3	3	4	6	7	5
PhD Time to Completion (months)	67	46 & 72	54,58, 60	57 & 62*	57, 60, 72, 77,	47, 51, 55, 78	50*, 70, 96*	48, 50, 64, 70	51, 59, 79, 80	80, 76, 54, 79	67, 80, 80, 48, 62, 68	84, 64, 48, 72, 58, 60, 96	48, 48, 48, 46, 60

* student transferred to clinical from an experimental program

** student transferred to clinical from an experimental program and had to apply for re-instatement

Faculty Statistics

	U of R 2007- 2008	U of R 2008- 2009	U of R 2009- 2010	U of R 2010- 2011	U of R 2011- 2012	U of R 2012- 2013	U of R 2013- 2014	U of R 2014- 2015	U of R 2015- 2016
<i>Total number of core faculty</i>	10	10	10	10	10	9	9	9	12
<i>Total number of complementary faculty</i>	10	10	9	9	10	10	10	10	10
<i>Total number of adjunct faculty & professional associates</i>	13	16	16	19	22	26	21	21	22
<i>Core faculty males tenured</i>	40%	40%	40%	40%	40%	33%	44%	44%	25%
<i>Core faculty males non-tenured</i>	0%	0%	0%	10%	10%	11%	0%	0%	17%
<i>Core faculty females tenured</i>	40%	40%	50%	40%	40%	44%	44%	44%	50%
<i>Core faculty female non-tenured</i>	20%	20%	10%	10%	10%	11%	11%	11%	8%
<i>Authors/co-authors of papers at professional or scientific meetings</i>	100%	100%	100%	100%	100%	100%	100%	100%	100%
<i>Authors/co-authors of articles in refereed journals</i>	100%	100%	100%	100%	100%	100%	100%	100%	100%
<i>Member of Journal editorial board</i>	30%	30%	40%	40%	30%	33%	44%	30%	42%
<i>Thesis supervisor</i>	80%	80%	90%	90%	80%	100%	100%	100%	67%
<i>Thesis supervisor (complementary faculty)</i>	40%	20%	11%	22%	20%	10%	20%	20%	10%
<i>Recipients of grants or contracts</i>	100%	100%	100%	100%	90%	89%	100%	100%	100%
<i>Members in professional associations</i>	100%	100%	100%	100%	100%	100%	100%	100%	100%
<i>Engaged in professional practice</i>	90%	90%	90%	100%	100%	100%	100%	100%	67%
<i>Engaged in professional practice (adjunct)</i>	100%	94%	100%	100%	100%	100%	100%	100%	100%
<i>Registered in program jurisdiction</i>	90%	90%	90%	100%	100%	100%	100%	100%	100%
<i>Registered in program jurisdiction (adjunct and professional associates)</i>	100%	94%	100%	100%	100%	92%	86%	86%	86%

Course Offerings

	U OF R 2007- 2008	U of R 2008- 2009	U of R 2009- 2010	U of R 2010- 2011	U of R 2011- 2012	U of R 2012- 2013	U of R 2013- 2014	U of R 2014- 2015	U of R 2015- 2016
<i>Total number of core courses (neuro, cognitive, social, psychopathology, history)</i>	3	5	4	4	3	5	2	4	4
<i>Total number of foundational courses (ethics, research design, statistics, psychometrics, MA seminar)</i>	5	4	3	4	5	4	5	4	5
<i>Total number of professional courses (assessment I and II, interventions I and II, doctoral seminar)</i>	3	4	4	4	3	4	3	3	3
<i># core faculty teaching core courses</i>	20%	10%	20%	10%	20%	20%	11%	10%	8%
<i># core faculty teaching foundational courses</i>	20%	20%	10%	20%	20%	50%	33%	20%	17%
<i># core faculty teaching professional courses</i>	30%	40%	40%	40%	50%	75%	33%	30%	30%
<i># of complementary faculty teaching core courses</i>	10%	30%	22%	33%	40%	80%	10%	30%	30%
<i># of complementary faculty teaching foundational courses</i>	30%	30%	11%	11%	20%	50%	20%	10%	30%
<i># of complementary faculty teaching professional courses</i>	0	0	0	0	0	0	0	0	0
<i># of adjunct teaching core courses</i>	0	0	0	0	0	0	0	0	0
<i># of adjunct teaching foundational courses</i>	0	0	0	0	0	0	0	0	0
<i># of adjunct faculty and professional associates teaching professional courses</i>	0	0	0	0	0	25%	0	0	0

Feedback Wanted

What are our strengths?

What are our weaknesses?

What could we improve?

Please Send Feedback to:

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